



Julie K Wiedner CPA, PC

Individual Client Tax Organizer

Please complete this Organizer before your appointment.

TAX YEAR BEING FILED: _____

YOU WILL NEED:

- * Tax Information (ALL Forms: W-2, 1099, 1098, 1095, etc...)
- * Social Security Cards and ITIN letters for all persons on your tax return
- * Picture ID (valid driver's license) for you and your spouse

YOU ARE RESPONSIBLE FOR ALL INFORMATION ON YOUR RETURN. PLEASE PROVIDE COMPLETE AND ACCURATE INFORMATION

PART I: Personal Information

Taxpayer Information

Last Name _____

First Name _____

Middle Initial _____ Suffix _____

Social Security Number** _____

Driver's License (State & Number) _____

Date of Birth _____

Occupation _____

Work Phone _____

Cell Phone _____

E-Mail Address _____

Spouse Information

Last Name _____

First Name _____

Middle Initial _____ Suffix _____

Social Security Number** _____

Driver's License (State & Number) _____

Date of Birth _____

Occupation _____

Work Phone _____

Cell Phone _____

E-Mail Address _____

Are you a U.S. Citizen? (Y/N) _____

Can anyone claim you on their tax return? (Y/N) _____

Identity Theft Victim? ITIN _____

Legally Blind?

Total & Permanently Disabled?

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Can anyone claim you on their tax return? (Y/N) _____

Identity Theft Victim? ITIN _____

Legally Blind?

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Full Time Student?
Presidential Campaign Fund?

Full Time Student?
Presidential Campaign Fund?

Home Address _____
City _____ State _____ Zip _____
Home Number _____ Fax Number _____

Marital Status:

- Married filing Separately (Include Spouses Information above)
- Married Filing Jointly
- Legally Separated: Separate Maintenance Agreement Date _____
- Single
- Divorced: Date of final decree _____
- Window(er): Date of Spouse's Death _____

E-File

Direct Deposit

IRS Pmt Draft

Bank Name _____
Routing number _____
Account number _____
Account Type _____ (Please provide a voided check)



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Dependents (Children & Others) Information PLEASE PROVIDE COPIES OF SOCIAL SECURITY CARDS
as names and numbers must match the social security cards

| | | | | | |
|------------------|--------------|--|---|--|--------------------------|
| First Name _____ | MI _____ | Social Security Number** _____ | Date of Birth _____ | Months Lived w/Taxpayer _____ | Child Care Expense _____ |
| Last Name _____ | Suffix _____ | Relationship _____ | <input type="checkbox"/> Total & Permanent Disabled | Dependent's Gross Income _____ | |
| | Y/N _____ | U.S. Citizen _____ | <input type="checkbox"/> Full Time Student | | |
| | Y/N _____ | Qualifying Child/Relative of any other person? _____ | Y/N _____ | Did you pay more than 50% of supporting this person? _____ | |

_____ Total & Permanent Disabled

_____ U.S. Citizen? Full Time Student

_____ Qualifying Child/Relative of any other person? _____ Did you pay more than 50% of supporting this person? _____

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Copies of Items to Provide for your appointment: (please state if copies or if originals that need to be returned)

Last year's tax return

ALL STATEMENTS:

- * W-2s
- * 1099-R ~ Distribution from Pensions, Annuities, Retirement, Profit Sharing, IRAs, etc...
- * SSA-1099 or RRB-1099 ~ Social Security/Railroad Benefits
- * 1099 Misc ~ Miscellaneous Income
- * 1099-INT ~ Interest Income
- * 1099-DIV ~ Dividend Income Investment Records (Broker Statements)
- * 1099-B, 1099-S ~ Sales of stock, bonds, Real Estate, etc... Purchases/Sales Agreements (all closing documents)
- * 1099-G ~ Certain government Payments Purchase documents for basis of Stocks and IRAs
- * 1099-K ~ Merchant Card and Third Party-Network Payments
- * 1099-Q ~ Payments from Qualified Education Programs
- * 1099-C ~ Cancellation of Debt
- * 1099-A ~ Mortgage Foreclosure/Cancellation of Debt
- * W-2G ~ Gambling or Lottery winnings
- * Sch K-1 ~ Partnership, S-Corporation, Trust or Estate Income
- * 1095-A, 1095-B, 1095-C Health Insurance
- * 8965 ~ Health Care Exemption from Coverage

OTHER INCOME:

- Alimony or Separate Maintenance Payments (must include payer's SSN)
- Jury Duty
- Unreported Income/Tips
- Disability income (workers compensation or insurance)
- Business, Rentals, Farm
- Cash/Check payments for any work performed not reported on W-2 or 1099
- Farm Records (see employment related expense listing)
- Trust Records (if own a trust and need to file Federal Form 1041, please include legal documents)

ADJUSTMENTS TO INCOME:

- * **1098-T:** Education Tuition and Fees: Attach all Forms and a list of your qualified education expenses
- Child & Other Dependent Care Expenses: **Please provide the Name, Address, ID Number and amount paid**
- * **5498:** Deductible Retirement Plan Contributions (Traditional IRA, SEP, Keogh, 401(k), or SIMPLE)
- **** **5498: NON DEDUCTIBLE** Retirement Plan Contributions (ROTH IRA)
- Alimony or Separate Maintenance Payments (must include recipient's SSN)
- Self Employment Health Insurance : F1095A or F1095B
- * 5498-SA Health Savings Account
- * 1099-SA Health Savings Account
- * 1098-E ~ Student Loan Interest
- Educator Expenses



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ITEMIZED DEDUCTIONS:

- Medical/Dental Expenses (out of pocket expenses and miles driven for medical purposes)
- Property Taxes **paid during the current calendar year**
- * F1098 – Mortgage Interest Expense
- Charitable Contributions: **Need proof of payment, itemized listing w/values, and Receipt from Qualified Organization with statement that nothing was received in exchange for the donation**
- Casualty/Theft losses
- Unreimbursed Employment Related Expenses (see non inclusive listing as examples)
 - * written records of business mileage
 - * total miles (personal & business) ~ **odometer readings**
 - * commuting distance
 - * Business Related gas, oil, maintenance expenses, etc...
 - * insurance
 - * toll/parking charges
 - * Union and Professional Dues
 - * tax preparation fees
- * business related meals
- * professional subscriptions
- * business supplies
- * equipment (original cost, depreciation, etc...)
- * business phone/cell phone/fax, etc...
- * home office (bus sq ft & total house sq ft)
- * safe deposit box rental
- * parking fees, tolls, etc...

- Prior year carryovers (capital loss, credits, charitable contributions, etc...)
- Estimated and Extension Taxes Paid (**amount paid and date mailed**)

| | | | |
|-------------|----|-------|-------|
| * 1Q ES | \$ | _____ | _____ |
| * 2Q ES | \$ | _____ | _____ |
| * 3Q ES | \$ | _____ | _____ |
| * 4Q ES | \$ | _____ | _____ |
| * Extension | \$ | _____ | _____ |

General Questions: (mark box if yes)

- Changes in Personal Information
 - * Marital Status
 - * Dependents
- Do you want to allow your tax preparer to discuss this year's return with the IRS?
- Do you or your spouse plan to retire in the current year?
- Were you or your spouse a member of the U.S. Armed Forces during the tax year being filed?
- Were you or your spouse employed out of the U.S. during the tax year being filed? (Please give dates)
- Did you incur adoption expenses during the tax year being filed?
- Were you notified by the IRS or state taxing authority of any changes to a prior year's return?
- Were there any changes to a prior year's income, deductions, credits, etc which would require filing an amended return?
- Did you have any foreign income or pay any foreign taxes in the tax year being filed?
- Do you have an FBAR account?
- At any time during the tax year, did you have an interest in or a signature or other authority over a bank account, or other financial account in a foreign country? If yes, enter the name of the foreign country: _____
- Were you the grantor of or transferor to a foreign trust which existed during the tax year, whether or not you have any beneficial interest in?
- If you or your spouse are self-employed, are either of you eligible to participate in an employer's health plan at another job?
- Did your employer pay premiums on the life insurance in excess of \$50,000 where the proceeds are payable to the beneficiaries named by you?



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- Did you contribute to or receive distributions from a Health Savings Account (HSA)?
- Did you add energy efficient property to your home in the tax year being filed? (solar energy, solar water heating, fuel cell, small wind energy, etc...)
- Did you start paying mortgage insurance premiums in the tax year being filed?
- Did you purchase a motor vehicle or boat in the tax year being filed? (Attach documentation showing sales tax paid)
- Did you purchase a Hybrid Vehicle in the tax year being filed?
- Did you or your spouse make gifts of over \$14,000 to an individual or contribute to a prepaid tuition plan?
- Did you make gifts to a trust?
- If there were dues paid to an association, was any portion required to be non-deductible due to political lobbying by the association?
- Did you make a loan at an interest rate below market rate?
- Did you pay any individual for services in the tax year being filed that qualify for F1099? Did you file F1099/F1096 for those services?**
- Did you receive stock from a stock bonus plan with your employer?
- Did you buy or sell any stocks or bonds in the tax year being filed?
- Did you surrender any U.S. Savings Bonds during the tax year being filed? Did you include the 1099-INT?
- Did you use the proceeds from Series EE or I U.S. Savings Bonds purchased after 1989 to pay for higher education expenses?
- Did you start a business, purchase rental property or farm, or acquire interests in partnerships or S-Corporations?
- Do you have any investments for which you were not personally "at risk"?
- Did you sell property or equipment on installment sales in the tax year being filed?
- Did you do a "like-kind" exchange of property in the tax year being filed?
- Did you make a cash contribution to a qualified 501(c)(3) where you received any benefit?
- Did you move your residence because of a change in job location? (Please provide expense and mileage detail)
- Did you make contributions to a traditional IRA, ROTH IRA, SIMPLE IRA, or SEP IRA?
- Did you roll over a traditional IRA to a ROTH IRA?
- Did you have any payments that qualified for Form 1099 filings? Did you file Form 1099?**
- Did you maintain a written auto log for your business?**
- Please provide the source of Health Insurance and number of months for each taxpayer and dependents (even for those who could be dependents)**

To the best of my knowledge, the enclosed information is correct and includes all income, deductions, and other information necessary for the preparation of this year's income tax returns for which I have adequate records.

Taxpayer's Signature: _____

Date: _____

Spouse's Signature: _____

Date: _____